

## HAWAII STATE ETHICS COMMISSION 1001 BISHOP STREET, PACIFIC TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470 email: ethics@hawaiiethics.org

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STATE OF MANAGE ETATE ETHICS COMMISSION

## LOBBYIST REGISTRATION FORM

PART I LOBBYIST	(ту	pe or Print Clearly)					
NAME(Last)	(First)	(Middle)	TELEPHONE				
Matsuura	Scott	Α.	525-6640				
MAILING ADDRESS (Street)			FAX				
P.O. Box 3440			525-6677				
(City)	(State)		(Zip Code)				
Honolulu	·	Hawaii	96801				
EMPLOYING ORGANIZATION (FIII	lined to lobby) TELEPHONE						
Alexander & Baldwin,	Inc.		525-6640				
MAILING ADDRESS (Street)			FAX				
P.O. Box 3440			525-6677				
(City)	(State)		(Zip Code)				
Honolulu		Hawaii	96801				

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FO	TELEPHONE	
Alexander & Baldwin, Inc.	525-6640	
MAILING ADDRESS (Street)	,	FAX
P.O. Box 3440 (City)		525-6677
(Oity)	(State)	(Zip Code)
Honolulu	Hawaii	96801
NAME OF PERSON RESPONSIBLE FOR PREPA	RING ORGANIZATION'S EXPENDITURES STATEM	TELEPHONE
Scott Matsuura		525-6640
MAILING ADDRESS (Street)		FAX
P.O. Box 3440		525-6677
(City)	(State)	(Zip Code)
Honolulu	Hawaii	96801

PART III DESCRIPTION OF	SUBJECTS UPON WHIC	H YOU EXPEC	TTOLOPPY				
X Agriculture	Education	X Human S		X	Science, Technology &		
X   Communications &   Public Utilities	Government Operations & Finance	X Intergove Internatio	ernmental Relations, onal Affairs	X	Tourism & Recreation		
X   Consumer Protection & Commerce	Hawaiian Affairs	X Labor & E	Employment	X	Transportation		
Culture, Arts, Historic Preservation	X   Health	X Planning, Use Mana	Land & Water agement	1 1	Other: (indicate below)		
X   Ecology, Energy   Environmental Protection	X   Housing	Public Sa	fety & Corrections				
PART IV CERTIFICATION OF	LOBBYIST						
I hereby certify that the info	Mation furnished above is	to the best of	my knowledge (	correct	and complete		
	5	,	my knowledge, (	JOHECL	and complete.		
(Sic	(Signature of Lobbyist) December 11, 2002						
, ,	The state of Eddby lot)		(L	Date)			
PART V AUTHORIZATION TO	LOBBY						
NAME		TITLE OF AUTHO	ORIZING OFFICER	OR PER	SON REPRESENTED		
Michael J. Marks	Vice President and General Counsel						
NAME OF ORGANIZATION (if applicable)				TELEPHONE			
Alexander & Baldwin, Inc.	525-	525-6622					
MAILING ADDRESS (Street)			FAX				
P.O. Box 3440			525-	-6678			
(City)	(State)	(Zip Code)					
Honolulu		Hawaii			96801		
I hereby authorize the above	- named person to engag	ilut		/ 12/	undersigned.		
, 2 (Orginatal Or Additional	(Da	ate) 🔨					